

<i>SERFF Tracking Number:</i>	<i>ARKS-125925834</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>00006 - INSURANCE SERVICES OFFICE, INC.</i>	<i>State Tracking Number:</i>	<i>#106383 \$50</i>
<i>Company Tracking Number:</i>	<i>BP-2008-RRU1</i>		
<i>TOI:</i>	<i>05.0 Commercial Multi-Peril - Liability &amp; Non- Liability</i>	<i>Sub-TOI:</i>	<i>05.0002 Businessowners</i>
<i>Product Name:</i>	<i>n/a</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## Filing at a Glance

Company: 00006 - INSURANCE SERVICES OFFICE, INC.

Product Name: n/a

SERFF Tr Num: ARKS-125925834 State: Arkansas

TOI: 05.0 Commercial Multi-Peril - Liability & Non-Liability

SERFF Status: Closed

State Tr Num: #106383 \$50

Sub-TOI: 05.0002 Businessowners

Co Tr Num: BP-2008-RRU1

State Status: Fees verified and received

Filing Type: Rate/Rule

Co Status:

Reviewer(s): Betty Montesi, Llyweyia Rawlins

Author:

Disposition Date: 12/02/2008

Date Submitted: 12/01/2008

Disposition Status: Filed

Effective Date Requested (New): 01/01/2009

Effective Date (New): 01/01/2009

Effective Date Requested (Renewal): 01/01/2009

Effective Date (Renewal): 01/01/2009

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 12/02/2008

State Status Changed: 12/02/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

## Company and Contact

### Filing Contact Information

SERFF Tracking Number: ARKS-125925834 State: Arkansas  
Filing Company: 00006 - INSURANCE SERVICES OFFICE, INC. State Tracking Number: #106383 \$50  
Company Tracking Number: BP-2008-RRU1  
TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0002 Businessowners  
Liability  
Product Name: n/a  
Project Name/Number: /

NA NA,  
NA  
NA, AR 00000  
NA@NA.com  
(123) 555-4567 [Phone]

**Filing Company Information**

00006 - INSURANCE SERVICES OFFICE, CoCode: 6 State of Domicile: Arkansas  
INC.  
No Address Group Code: Company Type:  
City, AR 99999 Group Name: State ID Number:  
(999) 999-9999 ext. [Phone] FEIN Number: 99-9999999  
-----

SERFF Tracking Number:	ARKS-125925834	State:	Arkansas
Filing Company:	00006 - INSURANCE SERVICES OFFICE, INC.		State Tracking Number: #106383 \$50
Company Tracking Number:	BP-2008-RRU1		
TOI:	05.0 Commercial Multi-Peril - Liability & Non-Sub-TOI:		05.0002 Businessowners Liability
Product Name:	n/a		
Project Name/Number:	/		

## Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	
Per Company:	No

SERFF Tracking Number: ARKS-125925834 State: Arkansas  
Filing Company: 00006 - INSURANCE SERVICES OFFICE, INC. State Tracking Number: #106383 \$50  
Company Tracking Number: BP-2008-RRU1  
TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0002 Businessowners  
Liability  
Product Name: n/a  
Project Name/Number: /

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Llyweyia Rawlins	12/02/2008	12/02/2008

SERFF Tracking Number:	ARKS-125925834	State:	Arkansas
Filing Company:	00006 - INSURANCE SERVICES OFFICE, INC.	State Tracking Number:	#106383 \$50
Company Tracking Number:	BP-2008-RRU1		
TOI:	05.0 Commercial Multi-Peril - Liability & Non-Sub-TOI:		05.0002 Businessowners Liability
Product Name:	n/a		
Project Name/Number:	/		

## Disposition

Disposition Date: 12/02/2008  
Effective Date (New): 01/01/2009  
Effective Date (Renewal): 01/01/2009  
Status: Filed  
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ARKS-125925834 State: Arkansas  
Filing Company: 00006 - INSURANCE SERVICES OFFICE, INC. State Tracking Number: #106383 \$50  
Company Tracking Number: BP-2008-RRU1  
TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0002 Businessowners  
Liability  
Product Name: n/a  
Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	ARKS-125925834		Yes

SERFF Tracking Number:	ARKS-125925834	State:	Arkansas
Filing Company:	00006 - INSURANCE SERVICES OFFICE, INC.	State Tracking Number:	#106383 \$50
Company Tracking Number:	BP-2008-RRU1		
TOI:	05.0 Commercial Multi-Peril - Liability & Non-Sub-TOI:		05.0002 Businessowners Liability
Product Name:	n/a		
Project Name/Number:	/		

## Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: ARKS-125925834 State: Arkansas  
Filing Company: 00006 - INSURANCE SERVICES OFFICE, INC. State Tracking Number: #106383 \$50  
Company Tracking Number: BP-2008-RRU1  
TOI: 05.0 Commercial Multi-Peril - Liability & Non- Sub-TOI: 05.0002 Businessowners  
Liability  
Product Name: n/a  
Project Name/Number: /

## Supporting Document Schedules

### Review Status:

**Satisfied -Name:** ARKS-125925834

12/02/2008

**Comments:**

**Attachment:**

ARKS-125925834.pdf



ARKS-125925834

12



2828 E. TRINITY MILLS ROAD SUITE 150 CARROLLTON, TX 75006  
TEL: (214) 390-1825 FAX: (214) 390-1975

# 106383  
50.00

Kenneth J. Hill, CPCU  
Regional Director, Government Relations

November 25, 2008

~~Approved until withdrawn  
or revoked~~

Honorable Julie Benafield Bowman  
Commissioner of Insurance  
Arkansas Insurance Department  
1200 West Third Street  
Little Rock, Arkansas 72201-1904

DEC 02 2008

Arkansas Insurance Department  
By: *Filed-LK*

Attention: William R. Lacy, Director  
Property and Casualty Division

RE: Insurance Services Office, Inc.  
BP-2008-RRU1  
Businessowners  
Terrorism Pricing Rules Revised  
**REFERENCE FILING**  
State of Arkansas

Dear Mr. Lacy:

We hereby file the enclosed advisory reference document.

ISO does not establish an effective date for Businessowners rules revisions in Arkansas. Each insurer that elects to utilize this revision is responsible for determining its own effective date and complying with any applicable regulatory requirements. We will distribute this material to our participating insurers and update our electronic deliveries under cover of a Notice bearing a date of January 2009, or the earliest possible subsequent date following your acknowledgement.

Related loss cost filing BP-2008-RLA1 is also submitted today under separate cover.

Please return an acknowledged copy of this cover letter for our records. An addressed, stamped envelope is enclosed for your convenience. We have also included an additional copy of this letter and envelope; we request that you return it now with a "received" stamp to confirm that you have received the filing.

Very truly yours,

*Donald J. Beckel*

Donald J. Beckel, CPCU, ARM  
Assistant Regional Manager  
Government Relations

DJB:dlb  
Encl.

**RECEIVED**

DEC 01 2008

PROPERTY AND CASUALTY DIVISION  
ARKANSAS INSURANCE DEPARTMENT



## Property &amp; Casualty Transmittal Document

**1. Reserved for Insurance Dept. Use Only**~~Approved until withdrawn  
or revoked~~

DEC 02 2008

Arkansas Insurance Department

By: *LK-Filed***2. Insurance Department Use only**

a. Date the filing is received:

b. Analyst:

c. Disposition:

d. Date of disposition of the filing:

e. Effective date of filing:

New Business

Renewal Business

f. State Filing #:

g. SERFF Filing #:

h. Subject Codes

**3. Group Name****Group NAIC #****4. Company Name(s)****Domicile****NAIC #****FEIN #****State #**

Insurance Services Office, Inc.

DE

13-3131412

**5. Company Tracking Number**

BP-2008-RRU1

**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Donald J. Beckel Insurance Services Office, Inc. 2828 E. Trinity Mills Rd., Ste. 150 Carrollton, TX 75006	Asst. Regional Manager	(214) 390-1825 Ext. 224	(214) 390-1975	DBECKEL@iso.com

7. Signature of authorized filer

8. Please print name of authorized filer

Donald J. Beckel

**RECEIVED****Filing information** (see General Instructions for descriptions of these fields)

DEC 01 2008

9.	Type of Insurance (TOI)	5.000
10.	Sub-Type of Insurance (Sub-TOI)	5.0002
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	n/a
12.	Company Program Title (Marketing title)	2006 Businessowners Program
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14.	Effective Date(s) Requested	New: 01/01/2009    Renewal: 01/01/2009
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	Not Applicable
17.	Reference Organization # & Title	Not Applicable
18.	Company's Date of Filing	11/25/08
19.	Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

PROPERTY AND CASUALTY DIVISION  
ARKANSAS INSURANCE DEPARTMENT

**Property & Casualty Transmittal Document---**

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	<b>BP-2008-RRU1</b>
------------	--	---------------------

<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
------------	--

This filing revises the Pricing section of the Businessowners Terrorism Rules in conjunction with a related Businessowners 2008 Experience Review filing.

<b>22.</b>	<b>Filing Fees</b> (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
------------	---

Check #: 106383  
Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

\*\*\*Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

**RATE/RULE FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	BP-2008-RRU1
----	---	--------------

2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	n/a
----	--	-----

☐ Rate Increase

☐ Rate Decrease

☒ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File and Use
----	---	--------------

4a.	Rate Change by Company (As Proposed)						
-----	--------------------------------------	--	--	--	--	--	--

Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
Insurance Services Office, Inc.	n/a	n/a	N/A	N/A	N/A	n/a	n/a

4b.	Rate Change by Company (As Accepted) For State Use Only						
-----	---	--	--	--	--	--	--

Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

5. Overall Rate Information (Complete for Multiple Company Filings only)			
--	--	--	--

		COMPANY USE	STATE USE
5a.	Overall percentage rate indication (when applicable)	N/A	
5b.	Overall percentage rate impact for this filing	N/A	
5c.	Effect of Rate Filing – Written premium change for this program	N/A	
5d.	Effect of Rate Filing – Number of policyholders affected	N/A	

6.	Overall percentage of last rate revision	n/a
----	--	-----

7.	Effective Date of last rate revision	n/a
----	--------------------------------------	-----

8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File and Use
----	---	--------------

9.	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	Terrorism Pricing Rule	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	

# Businessowners Terrorism Pricing Rules Revised

## About This Filing

---

This filing revises the Pricing section of the Businessowners Terrorism Rules in conjunction with a related Businessowners 2008 Experience Review filing.

## Revised Rules

We are revising the Businessowners Terrorism Rules, Paragraph C. Pricing, in the Businessowners Section of the Commercial Lines Manual Terrorism Supplement.

We have used a format of ~~striking through~~ deletions, underlining additions and inserting a revision bar in the left margin to indicate changes from the current versions to the new versions. Concurrent with implementation, the new versions will supersede the prior versions.

## Related Filing(s)

---

Loss Costs Filing BP-2008-RLA1

## Background

---

In rules filing BP-2007-RTRP1, we revised the Terrorism Pricing Rules under Premium Determination (Paragraph C.2.), in response to the Terrorism Risk Insurance Program Reauthorization Act of 2007, to specify that the state base rate for buildings and business personal property was to be adjusted by applying a factor of .995 since the state base rate for buildings and business personal property had included a loading for so-called domestic acts of terrorism. Under the Reauthorization Act, certified acts are no longer restricted to foreign-based acts.

## **Explanation of Changes**

---

In companion loss costs filing BP-2008-RLA1, we are removing from the loss costs the loading for so-called domestic acts of terrorism. In conjunction with that filing, we are removing the factor implemented in Paragraph C.2. of rules filing BP-2007-RTRP1.

Refer to loss costs filing BP-2008-RLA1 for details on the loading for so-called domestic acts of terrorism.

## **Copyright Explanation**

---

The material distributed by Insurance Services Office, Inc. is copyrighted by ISO Properties, Inc. All rights reserved. Possession of these pages does not confer the right to print, reprint, publish, copy, sell, file or use same in any manner without the written permission of the copyright owner.

## **Important Note**

---

Insurance Services Office, Inc. (ISO) makes available advisory services to property/casualty insurers. ISO has no adherence requirements. ISO rules and explanatory materials are intended solely for the information and use of ISO's participating insurers and their representatives, and insurance regulators. Neither ISO's general explanations of rules intent nor opinions expressed by members of ISO's staff necessarily reflect every insurer's view or control any insurer's application of manual rules.

## Terrorism Supplement – Excerpt of Rule

### C. Pricing

#### 2. Premium Determination

~~The state base rates for building and business personal property in the state rates section of the manual include a provision to reflect the domestic terrorism peril. Certified acts of terrorism now include certain domestic acts. When coverage is provided for certified acts, apply a factor of .995 to the building and business personal property state final rate determined in Rule 23.C.6.a.(2)(c)(viii) because certain domestic acts are subject to the federal backstop. When coverage is excluded for certified acts, apply the same factor to the building and business personal property state final rate determined in Rule 23.C.6.a.(2)(c)(viii), in recognition of the exclusion. Refer to Paragraphs C.2.a., C.2.b. and C.2.c. for additional instructions on premium determination.~~

**Note: The text not shown in Paragraph C. of this Rule is unchanged and is not included in this exhibit. Paragraph C. will appear in its entirety in the Terrorism Supplement.**

